



TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	09/841,360
	Filing Date	April 24, 2001
	First Named Inventor	Franc J. Camara
	Group Art Unit	2174
	Examiner Name	Steven Paul Sax
<input type="checkbox"/> Sent via Express Mail Label No.:	Attorney Docket Number	154783.02

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form (in duplicate) <input type="checkbox"/> Fee Attached	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to TC
<input checked="" type="checkbox"/> Amendment / Reply (10 pages) <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Drawing(s) (sheets)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Declaration <input type="checkbox"/> Newly Executed (pages) <input type="checkbox"/> A copy from a prior application (37 CFR 1.63(d)) (pages)	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Information Disclosure Statement with Form PTO/SB/08A (pages)	<input type="checkbox"/> Petition	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Response to Notice to File Missing Parts <input type="checkbox"/> A copy of the Notice to File Missing Parts Under 37 CFR 1.52 or 1.5	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Application Data Sheet
CERTIFICATE OF MAILING OR TRANSMISSION (Under 37 CFR § 1.8(a)) I hereby certify that this correspondence is being: <input checked="" type="checkbox"/> deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, Mail Stop Amendment, P.O. Box 1450, Alexandria, VA 22313-1450; or <input type="checkbox"/> transmitted by facsimile on the date shown below to the USPTO at (703) _____. December 5, 2005 Date Signature Rimma N. Oks Printed Name	<input type="checkbox"/> General Power of Attorney (SB80) <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) ____	<input type="checkbox"/> Request for Corrected Filing Receipt <input checked="" type="checkbox"/> Return Receipt Postcard <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <input checked="" type="checkbox"/> Copy of this Transmittal Form <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Remarks <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees required, or credit any overpayments, to Deposit Account No. 50- 0463 for the above identified patent application.		

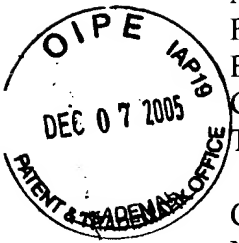
SIGNATURE OF ATTORNEY OR AGENT					
Signature		Reg. No.		52,291	
Name of Attorney or Agent		Lisa Tom			
Date	December 5, 2005	Tel.	(425) 707-3712	Facsimile No.	(425) 708-5046
Assignee Name:		MICROSOFT CORPORATION ONE MICROSOFT WAY REDMOND, WA 98052			
Customer Number:		22971			



IFW 2174

<div style="text-align: center;">Effective on 12/08/04 Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). FEE TRANSMITTAL For FY 2005</div>		<i>Complete if Known</i>					
		Application Number	09/841,360				
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Filing Date	April 24, 2001				
TOTAL AMOUNT OF PAYMENT (\$) 0.00		First Named Inventor	Franc J. Camara				
		Examiner Name	Steven Paul Sax				
		Art Unit	2174				
METHOD OF PAYMENT (check all that apply)		Attorney Docket No.	154783.02				
		Express Mail Label No.	N/A				
<div><input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____</div> <div><input checked="" type="checkbox"/> Deposit Account Deposit Account Number: 50-0463 Deposit Account Name: MICROSOFT CORPORATION</div> <div>For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)</div> <div><input checked="" type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee <input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 <input checked="" type="checkbox"/> Credit any overpayments</div> <div>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</div>							
FEE CALCULATION							
1. BASIC FILING, SEARCH, AND EXAMINATION FEES							
Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	_____
Design	200	100	100	50	130	65	_____
Plant	200	100	300	150	160	80	_____
Reissue	300	150	500	250	600	300	_____
Provisional	200	100	0	0	0	0	_____
2. EXCESS CLAIM FEES							Small Entity
Fee Description							Fee (\$)
Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent							50
Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent							200
Multiple dependent claims							360
Total Claims Extra Claims Fee (\$)							Fee Paid (\$)
22 -22or HP= 0 x 50 = 0							
HP = highest number of total claims paid for, if greater than 20							
Indep. Claims Extra Claims Fee (\$)							Fee Paid (\$)
3 - 3 or HP= 0 x 200 = 0							
HP = highest number of independent claims paid for, if greater than 3							
Multiple Dependent Claims							
Fee (\$)							Fee Paid (\$)
0							0
3. APPLICATION SIZE FEE							
If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).							
Total Sheets		Extra Sheets	Number of each additional 50 or fraction thereof		Fee (\$)	Fee Paid (\$)	
_____ -100 = 0		_____ / 50 = 0	(round up to a whole) number x		250	= 0	
4. OTHER FEE(S)							
Non-English Specification, \$130 fee (no small entity discount)						0	
Other: _____						0	

SUBMITTED BY		
Signature		Registration No. (Attorney/Agent) 52,291
Name (Print/Type)	Lisa Tom	Telephone (425) 707-3712
		Date December 5, 2005



Application No.: 09/841,360

First Named Inventor: Franc J. Camara

Filed: April 24, 2001

Customer No.: 22971

Title: Method and System for Presenting a Video Stream of a Video Streaming Device

Attorney Docket No.: 154783.02

Group Art Unit: 2174

Examiner: Steven Paul Sax

Confirmation Number: 6257

Commissioner for Patents

Mail Stop Amendment

P.O. Box 1450

Alexandria VA 22313-1450

AMENDMENT

Sir:

In response to the Office Action mailed September 21, 2005, please amend the above-identified application and consider the following remarks.

Amendments to the Claims are reflected in the listing of claims that begins on page 2 of this amendment.

Remarks begin on page 8 of this amendment.

Application Number: 09/841,360
Reply to Office Action dated 9/21/2005
Attorney Docket Number: 154783.02
Filing Date: 4/24/2001